Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: Clearwater PD Time of Inspection:	n/a	Dat	te of Insp	ection: 202			Number: 8	0-001740
Check or Test		YES	NO	Check or Test			YES	NO
Diagnostic Check		120	110			2+24	125	1.0
(Pre-Inspection): OK				Date and/or Time Adjusted		ceu		
Minimum Sample Volume			+	Barometric Pressure Sensor			+	
Check: OK				Check: OK		SHOOL		
Alcohol Free Subject			-	Mouth Alcohol Test:				
Test: 0.000				Slope Not Met				
Interferent Detect Test:				Diagnostic Check				
Interierent Detect Test: Interferent Detect				(Post-Inspection): OK				
Interierent Dete	et			(Post-In	spection): Ok			
Alcohol Free	0.05g/210L	Test	0.08g/210I	Test	0.20g/210L Test		0.08 g/210	L
Test			(g/210L)		(g/210L)		Dry Gas Std Test	
(g/210L)	-		Lot#:				(g/210L)	
	Exp:		Exp:		Exp:		Lot#: Exp:	
						_	EAP.	
						+		
Standard Deviations								
Average Standard Devia	ation of 0.05	, 0.08 and	d 0.20 g/21	OL Tests: _	Number of	Simul	Lators Use	a:
Remarks:								
Instrument did not receive a Department Inspection for 2022. It was sent to repair and did not return within the calendar year.								
The above instrument complies () does not comply () with Chapter 11D-8, FAC.								
I certify that I performed this inspection in accordance with the provisions of Chapter 11D-8, FAC.								
Taylor Gutschow Digitally signed by Taylor Gutschow Date: 2022.12.29 15:02:11 -05'00'				Taylor D. Gutschow				

Signature and Printed Name

12/29/2022 **Date**